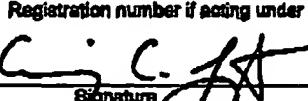


TOPAZ 03-04

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 022395-440700US
FY 2005 <i>(Fee pursuant to the Consolidated Appropriations Act, 2005 (PL 108-481))</i>		RECEIVED
Application Number 09/803,882		Filed July 11, 2001 CENTRAL FAX CENTER
For MONITORING BOUNDARY CROSSINGS IN A WIRELESS NETWORK		
Art Unit 2663		Examiner Stephen M. D'Agosta
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	Fee	Small Entity Fee
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$80
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$480	\$225
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1430</u> . WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/98). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>58,400</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
 Signature		<u>4/4/05</u> Date
<u>Craig C. Largent, Reg. No. 58,400</u> Typed or printed name		<u>(050-326-2420</u> Telephone Number
ITCHER 0000005 201430 09903982		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of _____ forms are submitted.		

04/26/2005

NOTE: Signatures of all the inventors or assignees

01 FC:1251
The signature below is given in accordance with the law of the state or other jurisdiction where the assignee or holder of the shares or stock or other representative(s) are required. Several multiple forms or more than one signature is required, see below.

Total of _____ forms are submitted.

This application of information is supported by 77 C.F.R., 1600.0. The information is required in order to make a benefit by the public which is in the best interest of the U.S. as lead by the USDA to prevent or minimize losses. Confidentiality is preserved by 25 U.S.C. 128 and 37 CFR 1.11 and 1.14. This application is submitted to the U.S. Department of Agriculture, Washington, D.C. 20250-0000, Attention: Office of the Secretary, Room 1000, 14th Street and Independence Avenue, SW, Washington, D.C. 20250-0000, and is being filed on COMPUTERIZED FORMS TO THE ADDRESS: FMS-VIA Computerized Form Routing, P.O. Box 6045, 60225-6045.